

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

103/4359

CLAIMS AS FILED - PART I

(Column 1)	(Column 2)
TOTAL CLAIMS	15
FOR	NUMBER FILED
TOTAL CHARGEABLE CLAIMS	15 minus 20 = * 0
INDEPENDENT CLAIMS	2 minus 3 = * 0
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

**SMALL ENTITY
TYPE** **OTHER THAN
SMALL ENTITY**

RATE	FEES	RATE	FEES
BASIC FEE	370.00	OR BASIC FEE	740.00
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X42=	<input type="checkbox"/>	OR X84=	<input type="checkbox"/>
+140=	<input type="checkbox"/>	OR +280=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	OR TOTAL	740

2/28/06 CLAIMS AS AMENDED - PART II

(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* 20	Minus ** 20 =
Independent	* 4	Minus *** 3 = 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

**OTHER THAN
SMALL ENTITY** **SMALL ENTITY**

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X42=	<input type="checkbox"/>	OR X84=	<input type="checkbox"/>
+140=	<input type="checkbox"/>	OR +280=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>	OR TOTAL ADDIT. FEE	10

(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	** =
Independent	* Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X42=	<input type="checkbox"/>	OR X84=	<input type="checkbox"/>
+140=	<input type="checkbox"/>	OR +280=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>	OR TOTAL ADDIT. FEE	10

(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	* Minus	** =
Independent	* Minus	*** =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>		

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>	OR X\$18=	<input type="checkbox"/>
X42=	<input type="checkbox"/>	OR X84=	<input type="checkbox"/>
+140=	<input type="checkbox"/>	OR +280=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>	OR TOTAL ADDIT. FEE	10

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.